

09/60751

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	11/16/14
Original	5/18/14
6	02/03/04
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12	N
13	✓
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41	✓
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50	✓

Claim	Date
Final	11/16/14
Original	5/18/14
51	+
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55	✓
56	✓
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71	—
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75	+
76	—
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80	✓
81	—
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Claim	Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
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